DECLARATION AND POVER OF ATTORNEY FOR PATENT APPLICATION

AT	EY DOCKET NO.	10002667-1	-

As a below named inventor, I hereby declare that:

My residence/post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

patent is sought on the invention entitled: Method And Apparatus To Optimize A Computing Session Based On User Interaction With A Computer						
the specification of wh	ch is at	tached hereto unless th	e following box is cl	hecked:		
() was filed on as US Application Serial No. or PCT International Application Number and was amended on (if applicable).						
	s amen	ded by any amendment	t(s) referred to abo	e above-identified specification, ve. I acknowledge the duty to CFR 1.56.		
inventor(s) certificate listed b	y benefits elow and	under Title 35, United State	y foreign application for	any foreign application(s) for patent or patent or inventor(s) certificate having a		
COUNTRY		APPLICATION NUMBER	DATE FILED	PRIORITY CLAIMED UNDER 35 U.S.C. 119		
N/A				YES: NO:		
				YES: NO:		
Provisional Application I hereby claim the benefit uselow:	nder Title	35, United States Code Sec	•	ed States provisional application(s) listed		
	APF	PLICATION SERIAL NUMBER	FILING DATE			
		N/A				
	r PCT inte	le of Federal Regulations, Sec ernational filing date of this ap FILING DATE	pplication:	(patented/pending/abandoned)		
N/A						
		,				
POWER OF ATTORNEY: As a named inventor, I her business in the Patent and Tr				secute this application and transact all		
Customer Number		022879	Place Customer Number Bar Code Label here			
Send Correspondence to:			Direct Telephon	e Calls To:		
HEWLETT-PACKARD CO		n T. Grant Ritz				
P.O. Box 272400 Fort Collins, Colorado 80	527-2400)	(970) 898-0697			
made on information ar the knowledge that wi or both, under Section	nd belie Iful fals 1001 o	f are believed to be true e statements and the li	e; and further that the ke so made are pun States Code and the	are true and that all statements nese statements were made with hishable by fine or imprisonment, hat such willful false statements.		
Full Name of Inventor: Raja	Daoud		Citizenship: LI	В		
Residence: P.	P.O. Box 4402 Santa Clara, CA 95056					
Post Office Address: P.O. Box 4402 Santa Clara, CA 95056						

Inventor's Signature

Date

DECLARATION AND POWER	OF ATTORNEY
FOR PATENT APPLICATION	(continued)

ORNEY DOCKET NO.	10002667-1

Full Name of # 2 joint inventor:	Thomas Edwin Turicchi Jr.		Citizenship: US
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Inventor's Signature		Date	
Full Name of # 3 joint inventor:			Citizenship:
Residence:			
Post Office Address:			
Inventor's Signature		Date	
Full Name of # 4 joint inventor:			Citizenship:
Residence:			
Post Office Address:			
Inventor's Signature		Date	
Euli Name of # E isint inventory	•		Citizanakia
Full Name of # 5 joint inventor: Residence:			Citizenship:
Post Office Address:			·
Post Office Address:			
Inventor's Signature		Date	
Full Name of # 6 joint inventor:			Citizenship:
Residence:			····
Post Office Address:			
Inventor's Signature		Date	
	•		
Full Name of # 7 joint inventor:			Citizenship:
Residence:			
Post Office Address:			
Inventor's Signature		Date	
oo o oignatu.o		Date	
Full Name of # 8 joint inventor	:		Citizenship:
Residence:			
Post Office Address:			
Inventor's Signature		Date	